Fill in this information to identify your	case:	
United States Bankruptcy Court for the: DISTRICT OF NEVADA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	SCOTT First Name	WHITNEY First Name
	identification (for example, your driver's license or passport).	J. Middle Name	R. Middle Name
		LEHR	LEHR
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	All other names you have used in the last 8	First Name	First Name
	years	riistivaine	Filst Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>7</u> <u>5</u> <u>2</u> <u>4</u>	xxx - xx - <u>6</u> <u>4</u> <u>1</u> <u>6</u>
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

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Del	otor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	_ Cas	se number (if known)
			About Debto	or 1:		About Debtor 2 (S	Spouse Only in a Joint Case):
4.	Any bus	siness names	⊘ I have n	ot used any business names o	or EINs.	☐ I have not use	ed any business names or EINs.
	and Em	ployer ation Numbers	_			SIERRA GOURI	MET MEATS
	(EIN) yo	u have used in	Business name			Business name	MET MEATO
	the last	8 years	Business name			Business name	
		trade names and usiness as names					
	doing be	iomeos as names	Business name			Business name	
			<u> </u>			<u> </u>	
			_			_	
			EIN			EIN	
5.	Where y	ou live				If Debtor 2 lives a	at a different address:
				IBOROUGH DR.		Number Street	
			Number Stre	eet		Number Street	
			_				_
			GARDNER'	VILLE NV 89410			
			City	State ZIP Code		City	State ZIP Code
			DOUGLAS County			County	
			•			County	
			the one above	ng address is different from ve, fill it in here. Note that the d any notices to you at this ess.		from yours, fill it	ing address is different in here. Note that the court ses to you at this mailing
			Number Stre	eet		Number Street	
			P.O. Box			P.O. Box	
			City	State ZIP Code		City	State ZIP Code
6.		u are choosing	Check one:			Check one:	
	this dist	trict to file for otcy	petition,	e last 180 days before filing this I have lived in this district long any other district.			180 days before filing this ve lived in this district longer ther district.
				nother reason. Explain. U.S.C. § 1408.)		I have anothe (See 28 U.S.	er reason. Explain. C. § 1408.)
		1					
P	art 2:	Tell the Court	About Your Ba	nkruptcy Case			
7.	Bankru	pter of the	,	or a brief description of each, s (Form 2010)). Also, go to the			.S.C. § 342(b) for Individuals Filing appropriate box.
	are cho	osing to file					
			Chapter 1	1			
			Chapter 1	2			
			☐ Chapter 1	3			

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Deb	otor 1 SCOTT	J.	LEHR	Case number (if known)	
	First Name	Middle Name	Last Name	<u> </u>	
8.	How you will pay the fee	court pay v	for more details about how you	e my petition. Please check with ou may pay. Typically, if you are pa money order. If your attorney is su a credit card or check with a pre-p	aying the fee yourself, you may bmitting your payment on your
				nts. If you choose this option, sign in Installments (Official Form 103A	• •
		By la than fee ir	w, a judge may, but is not req 150% of the official poverty lin n installments). If you choose	(You may request this option only i uired to, waive your fee, and may one that applies to your family size at this option, you must fill out the Ap 03B) and file it with your petition.	lo so only if your income is less and you are unable to pay the
9.	Have you filed for	√ No			
	bankruptcy within the last 8 years?	Yes.			
	•	District		When	Case number
		_		MM / DD / YYYY	
		District _			Case number
		District		MM / DD / YYYY When	
		District _		MM / DD / YYYY	
10.	Are any bankruptcy	☑ No			
	cases pending or being filed by a spouse who is	☐ Yes.			
	not filing this case with	Debtor		Relations	shin to you
	you, or by a business partner, or by an	_			
	affiliate?	District _		When MM / DD / YYYY	Case number, if known
		Debtor _		Relations	ship to you
		District _		When	
				MM / DD / YYYY	if known
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtained residence?	an eviction judgment against you a	nd do you want to stay in your
			No. Go to line 12. Yes. Fill out Initial State and file it with this bank	tement About an Eviction Judgmer kruptcy petition.	t Against You (Form 101A)

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Deb	tor 1	SCOTT	J.		LEHR	Case number (if known)		
		First Name	Middle N		Last Name				
Pa	art 3:	Report About A	Any Bu	usine	sses You Own as	a Sole Proprietor			
12.	of any f	u a sole proprietor full- or part-time ss? proprietorship is a			Go to Part 4. Name and location of b	pusiness			
	busines individu	ss you operate as an ual, and is not a			Name of business, if any Number Street				
	•	e legal entity such as ration, partnership, or							
	sole pro	ave more than one oprietorship, use a seet and attach it			City		State	ZIP Cod	de
	to this p					e box to describe your business:			
					Single Asset Rea	iness (as defined in 11 U.S.C. § al Estate (as defined in 11 U.S.C defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10	C. § 101(51B))		
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		can mos	<i>set ap</i> st rece	propriate deadlines. If nt balance sheet, stater	the court must know whether you you indicate that you are a sma ment of operations, cash-flow states of exist, follow the procedure in	ll business deb atement, and fe	otor, you i ederal inc	must attach your come tax return
	debtor	debtor? For a definition of small business debtor, see		No.	I am not filing under C	Chapter 11.			
				No.	I am filing under Chap the Bankruptcy Code.	oter 11, but I am NOT a small bu	siness debtor a	according	g to the definition in
		11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	pter 11 and I am a small business debtor according to the definition in the			
Pa	art 4:	Report If You C	Own o	r Hav	e Any Hazardous	Property or Any Property	y That Need	ls Imm	ediate Attention
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the hazard?				
	safety? any pro immedi			If immediate attention	is needed, why is it needed?				
	perisha livestoc	r example, do you own rishable goods, or estock that must be fed, or ouilding that needs urgent			Where is the property	? Number Street			
	•								
						City	s	state	ZIP Code

Debtor 1 SCOTT J. LEHR Case number (if known) Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefi	ng about
credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		SCOTT	J.		EHR	Case number (if known)			
		First Name	Middle N	ame La	st Name				
P	art 6:	Answer These	Quest	ions for Repo	orting Purpo	ses			
16. What kind of debts do you have?			16a	as "incurred b		sumer debts? Consurimarily for a personal, t		are defined in 11 U.S.C. § 101(8) pusehold purpose."	
			16b	money for a b				e debts that you incurred to obtain ne business or investment.	
			16c	State the type	of debts you ow	e that are not consume	r or busines	s debts.	
•		e you filing under napter 7?		No. I am not	filing under Cha _l	oter 7. Go to line 18.			
	any ex	Do you estimate that after any exempt property is			-		-	exempt property is excluded and to distribute to unsecured creditors?	
	admini	excluded and administrative expenses		☑ No					
	availab	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.		any creditors do timate that you	☑	1-49 50-99		1,000-5,000 5,001-10,000	무	25,001-50,000 50,001-100,000	
	owe?			100-199 200-999		10,001-25,000		More than 100,000	
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,0 \$100,001-\$500, \$500,001-\$1 mi	,000	\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 mil \$100,000,001-\$500 m	on 🔲	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,0 \$100,001-\$500, \$500,001-\$1 mi	000	\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 mil \$100,000,001-\$500 m	n	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case number (if known)			
Part 7:	Sign Below	Wildle Name	Lastivanie				
For you	_	I have examinand correct.	ed this petition, and I de	eclare under penalty of perjury that the information provided is true			
		or 13 of title 1	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		not pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).					
		I request relief	in accordance with the	chapter of title 11, United States Code, specified in this petition.			
		connection wit	•	t, concealing property, or obtaining money or property by fraud in n result in fines up to \$250,000, or imprisonment for up to 20 years, 9, and 3571.			
		X /s/ SCOTT	Γ J. LEHR LEHR, Debtor 1	X /s/ WHITNEY R. LEHR WHITNEY R. LEHR, Debtor 2			
		Executed of	n <u>09/21/2016</u> MM / DD / YYYY	Executed on <u>09/21/2016</u> MM / DD / YYYY			

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Debtor 1	SCOTT	J.	LEHR	Case number (if know	vn)
	First Name	Middle Name	Last Name		,
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		eligibility to prelief availab the debtor(s)	proceed under Chapter 7 ble under each chapter fo the notice required by 1	od in this petition, declare that I hav 7, 11, 12, or 13 of title 11, United St or which the person is eligible. I als I1 U.S.C. § 342(b) and, in a case in r an inquiry that the information in t	ates Code, and have explained the so certify that I have delivered to which § 707(b)(4)(D) applies,
			P. Patterson, Esq.	Date	99/21/2016 MM / DD / YYYY
		Sean P. Printed na	Patterson, Esq.		
			ntterson., Esq.		
		Firm Nam			
			ırt Street		
		Number	Street		
		Reno		NV	89501
		City		State	ZIP Code
		Contact p	phone (775) 786-1615	5 Email address Illega	lpat@aol.com
		5736			
		Bar numb	per	State	_

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Fill in this info	ormation to ic	dentify your	case and this fi	lina:		
Debtor 1	SCOTT	J.	LEHR	g.		
Debior 1	First Name	Middle Nan		е		
Debtor 2 (Spouse, if filing)	WHITNEY First Name	R. Middle Nan	LEHR ne Last Name			
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `						
United States Bar	kruptcy Court for	the: DISTRIC	T OF NEVADA			
Case number (if known)						if this is an ed filing
Official Form	106A/B					
Schedule A/	B: Property	/				12/15
Part 1: Des 1. Do you own o No. Go to	On the top of a scribe Each R or have any legal of Part 2.	ny additional property additional property and the second	oages, write your na	r Other Real Es	space is needed, attach a sper (if known). Answer ever state You Own or Have d, or similar property?	ry question.
Yes. Wh	ere is the propert	y?				
	•	-	for all of your entrie		-	\$0.00
entries for pa	ges you nave au	ached for Par	t 1. Write that numb	er nere	······································	
Part 2: Des	scribe Your V	ehicles				
you own that some	one else drives. I	f you lease a v	-	•	registered or not? Include cutory Contracts and Unexpir	•
□ No ☑ Yes						
3.1. Make:	FORD		no has an interest in eck one.	the property?	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:	F-350	🖳	Debtor 1 only Debtor 2 only		Creditors Who Have Claims Current value of the	Current value of the
Year:	2004	— H		r 2 only	entire property?	portion you own?
Approximate mileag	ge: 235,000	— <u> </u>	At least one of the	debtors and another	\$10,500.00	\$10,500.00
Other information: 2004 FORD F-35 miles)	0 (approx. 235	000 🗹	Check if this is con (see instructions)	mmunity property		
3.2.			no has an interest in	the property?	Do not deduct secured clair	•
Make:	LEXUS		eck one.		amount of any secured clair Creditors Who Have Claims	
Model:	GX470		Debtor 1 only Debtor 2 only		Current value of the	Current value of the
Year:	2004	— 💆	Debtor 1 and Debto	r 2 only	entire property?	portion you own?
Approximate mileag	ge: 210,000	—	At least one of the o	debtors and another	\$6,900.00	\$6,900.00
Other information: 2004 LEXUS GX	470 (annroy 21	10000 17	Check if this is co	mmunity property		
miles)	+10 (appiox. 2	10000	(see instructions)	minumity property		

miles)

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Deb	tor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case number (if known)	
4.					cles, other vehicles, and accessories snowmobiles, motorcycle accessories	
	✓ No ☐ Yes					
5.				n for all of your entries fr rt 2. Write that number h	om Part 2, including any ere→	\$17,400.00
P	art 3:	Describe	Your Personal an	d Household Items		
Do	you own	or have any I	egal or equitable inter	est in any of the followin	g items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		-	d furnishings liances, furniture, linens	, china, kitchenware		
	☐ No ✓ Yes	. Describe	THE DEBTORS HA	VE USED FURNITURE	AND HOUSEHOLD GOODS.	\$3,000.00
7.	Electroi Example	es: Television			ipment; computers, printers, scanners; cameras, media players, games	
	□ No ☑ Yes	. Describe	THE DEBTORS HA	VE A DELL LAPTOP C	OMPUTER. IT IS 6 YRS OLD.	\$150.00
8.		•		prints, or other artwork; bo	ooks, pictures, or other art objects; nemorabilia, collectibles	
	✓ No ☐ Yes	. Describe				
9.		es: Sports, ph	s and hobbies otographic, exercise, and d kayaks; carpentry too		bicycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes	. Describe				
10.	Firearm Example		es, shotguns, ammunit	on, and related equipment	1	
	☐ No ✓ Yes	. Describe	See continuation p	age(s).		\$600.00
11.			clothes, furs, leather co	ats, designer wear, shoes,	accessories	
	□ No ✓ Yes	. Describe	THE DEBTORS HA	VE USED CLOTHING.		\$400.00
12.				/, engagement rings, wedc	ling rings, heirloom jewelry, watches, gems,	
	☐ No ✓ Yes	. Describe	THE DEBTORS HA	VE JEWELRY.		\$4,000.00
13.	Example	m animals es: Dogs, cats	s, birds, horses			
	□ No	Describe	THE DERTORS HA	VE DOMESTIC PETS		\$100.00

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Deb		SCOTT	J.		LEHR	Case number (if known)	
		First Name	Middle N		Last Name		
14.	Any oth	-	household	items you	did not already list	i, including any health aids you	
	✓ No						
	Yes	Give specific					
	intoi	mation					
15.						any entries for pages you have	\$8,250.00
	attache	i for Part 3. Wri	te the numb	er nere		→	
P	art 4:	Describe Yo	our Financ	cial Asset	ts		
							Current value of the
Do	you own	or have any lega	al or equitat	ole interest	in any of the follow	wing?	portion you own?
							Do not deduct secured claims or exemptions.
16.	Cash						·
	Example	es: Money you ha petition	ave in your w	vallet, in you	r home, in a safe d	eposit box, and on hand when you file your	
	□ No	polition					
	_					Cash:	\$20.00
17.	— Deposit	s of money					
	•	es: Checking, sav	-			es of deposit; shares in credit unions,	
		brokerage hor institution, list	-	her similar i	nstitutions. If you h	ave multiple accounts with the same	
	□ No	,					
	_			Institution	name:		
	17.	Checking ac	ccount:	Checking	account (GREA	ATER NEVADA C.U.)	\$500.00
	17.	2. Checking a	ccount:		account (WELL		\$0.02
	17.	3. Savings acc	count:	Savings	account (GNCU)		\$25.00
18.	Bonds,	mutual funds, oi	r publicly tr	aded stock	s		
	•	es: Bond funds, i	nvestment a	ccounts with	n brokerage firms, r	noney market accounts	
	✓ No Ves		Institutio	n or issuer n	iame:		
10	ш					ncorporated businesses, including	
19.		est in an LLC, pa				icorporated businesses, including	
	☑ No						
	_	Give specific					
		1	. Name of	entity:		% of ownership:	
20.		•			•	negotiable instruments	
	-		•			promissory notes, and money orders. The by signing or delivering them.	
	✓ No			,		, , ,	
	Yes	Give specific					
		mation about	. Issuer na	ame:			
21.		ent or pension a					
		•	RA, ERISA, Ł	Keogh, 401(k), 403(b), thrift sav	ings accounts, or other pension or	
	□ No	· ·					
		List each	- .				
	acco	ount separately.	Type of ac		Institution name:	and the period has a result	
			401(K) or s	sımılar plan:	401(k) or simila PLAN	r plan-THE DEBTOR HAS A 403(b)	\$1.500.00

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Deb	tor 1	SCOTT	J.	LEHR	Case number (if known)		
		First Name	Middle Name	Last Name			
22.	Your s		deposits you have m		nue service or use from a company tric, gas, water), telecommunications		
	□ No)					
	✓ Ye	es		Institution name or individ			
		Security d	eposit on rental unit:	Security deposit on re	ental unit	\$1,200	0.00
23.	☑ No)			either for life or for a number of years)		
	_		Issuer name and				
24.	26 U.S	S.C. §§ 530(b)(1), 5	n IRA, in an accoun 29A(b), and 529(b)(1		gram, or under a qualified state tuition	າ program.	
	✓ No		Institution name a	and description. Separately	y file the records of any interests. 11 U.	S.C. § 521(c)	
25.		s, equitable or futures s exercisable for		perty (other than anything	listed in line 1), and rights or		
		o es. Give specific formation about the	m				
26.			•	rets, and other intellectua proceeds from royalties ar			
	_	o es. Give specific formation about the	m				
27.			nd other general int its, exclusive license	-	holdings, liquor licenses, professional l	licenses	
	☑ No	o					
		es. Give specific formation about the	m				
Mor	ney or p	property owed to y	ou?			Current value of t portion you own? Do not deduct sect claims or exemption	? ured
28.	Tax re	funds owed to yo	u				
	☑ No						
	_	es. Give specific in rout them, including			Fed	deral: \$ (0.00
	yo	u already filed the	returns		Sta	ate: \$0	0.00
	an	id the tax years			Loc	cal: \$0	0.00
29.	-	/ support bles: Past due or lu	mp sum alimony, sp	ousal support, child suppo	rt, maintenance, divorce settlement, pro	perty settlement	
	✓ No	o es. Give specific in	formation		Alimony:	\$1	0.00
	_				Maintenance:	\$1	0.00
					Support:	\$(0.00
					Divorce settlen	nent: \$ (0.00
					Property settle	ment: \$ (0.00
						·	_

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Debt		J.	LEHR	Case number (if known)	
	First Name	Middle Name	Last Name		
30.		s, disability insurance	e payments, disability ben nefits; unpaid loans you m	efits, sick pay, vacation pay, workers' nade to someone else	
	✓ No ☐ Yes. Give specific in	formation			
31.			health savings account ((HSA); credit, homeowner's, or renter's ins	urance
	✓ No Yes. Name the insur company of each pol and list its value	icy	me:	Beneficiary:	Surrender or refund value:
32.	Any interest in property If you are the beneficiary entitled to receive proper	of a living trust, expe	ect proceeds from a life in	od surance policy, or are currently	
	✓ No✓ Yes. Give specific in	formation			
33.	Examples: Accidents, en		-	it or made a demand for payment s to sue	
	✓ No✓ Yes. Describe each	claim			
34.	Other contingent and ur rights to set off claims	nliquidated claims o	f every nature, including	g counterclaims of the debtor and	
	✓ No Yes. Describe each	claim			
35.	Any financial assets you	u did not already lis	t		
	✓ No ☐ Yes. Give specific in	formation			
36.				r entries for pages you have	\$3,245.02
Pa	rt 5: Describe Any	Business-Relate	ed Property You Ov	vn or Have an Interest In. List a	ny real estate in Part 1.
37.	Do you own or have any	legal or equitable i	nterest in any business	-related property?	
	✓ No. Go to Part 6. ✓ Yes. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or	commissions you a	Iready earned		•
	✓ No ☐ Yes. Describe				
39.	desks, chairs			opiers, fax machines, rugs, telephones,	
	✓ No Yes. Describe				
40.	Machinery, fixtures, equ	ipment, supplies yo	ou use in business, and	tools of your trade	
	✓ No ☐ Yes. Describe				

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Deb	tor 1	SCOTT	J.	LEHR	Case number (if known)	
44	lmucanta	First Name	Middle Name	Last Name		
41.	Invento	ory				
	✓ No ☐ Yes	s. Describe				
42.	Interes	ts in partnerships o	or joint ventures			
	☑ No					
		s. Describe Nan	ne of entity:		% of ownership:	
43.	Custon	ner lists, mailing lis	sts, or other comp	ilations		
	✓ No ☐ Yes	s. Do your lists inc No Yes. Describ		lentifiable information((as defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related prop	perty you did not a	already list		
	✓ No ☐ Yes	s. Give specific info	rmation.			
45.					y entries for pages you have	\$0.00
					-	
Pa				mercial Fishing-Re farmland, list it in Pa	elated Property You Own or Have a art 1.	n Interest In.
46.	Do you	own or have any l	egal or equitable i	nterest in any farm- or	commercial fishing-related property?	
	₩ No.	Go to Part 7.				
		s. Go to line 47.				
	_					
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals <i>'es:</i> Livestock, poult	trv_farm-raised fish			
	✓ No ☐ Yes		y, raim raioca non			
48.	Crops-	either growing or l	harvested			
		0 0				
	_	s. Give specific				
49.	Farm a	nd fishing equipme	ent, implements, n	nachinery, fixtures, and	tools of trade	
	✓ No ☐ Yes	3 .				
50.	Farm a	nd fishing supplies	s. chemicals. and f	feed		
•••		д саррс	,,			
	✓ No ☐ Yes	S				
51.	Any far	m- and commercia	ıl fishing-related p	roperty you did not alre	eady list	
		s. Give specific				
52.					y entries for pages you have	#0.00
	attache	d for Part 6. Write	that number here		······	\$0.00

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Deb	otor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case nu	umber (if known)		
P	art 7:	Describe Al	l Property You Own	or Have an Ir	nterest in That You [Did Not List Abov	е	
53.	-		operty of any kind you di kets, country club member	•	t?			
	✓ No	o es. Give specific	information.					
54.	4. Add the dollar value of all of your entries from Part 7. Write that number here →						•	\$0.00
P	art 8:	List the Tota	als of Each Part of t	his Form				
55.	Part 1	: Total real esta	te, line 2			ə	•	\$0.00
56.	Part 2	: Total vehicles,	, line 5		\$17,400.00			
57.	Part 3	: Total personal	and household items, li	ne 15	\$8,250.00			
58.	Part 4	: Total financial	assets, line 36		\$3,245.02			
59.	Part 5	: Total business	s-related property, line 4	5	\$0.00			
60.	Part 6	: Total farm- and	d fishing-related propert	y, line 52	\$0.00			
61.	Part 7	: Total other pro	operty not listed, line 54		+ \$0.00			
62.	Total ¡	personal proper	rty. Add lines 56 through	າ 61	\$28,895.02	Copy personal property total	+	\$28,895.02
63	Total (of all property o	on Schedule A/B. Add I	ine 55 + line 62				\$28.895.02

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Debtor 1	SCOTT	J.	LEHR	Case number (if known)				
	First Name	Middle Name	Last Name					
10. Firearms (details):								
THE	DEBTORS HAV	E A MARLIN .270 R	\$250.00					
THE	THE DEBTORS HAVE A REMINGTON 12 GAUGE SHOTGUN.							
THE	DEBTORS HAV	E AN REMINGTON	JN. \$150.00					

Debtor 1		lentify your	case:			
	SCOTT	J.	LEHR			
	First Name	Middle Name				
Debtor 2 (Spouse, if filing)	WHITNEY First Name	R. Middle Name	LEHR E Last Name			
` '	nkruptcy Court for	the DISTRIC				
Case number	initiapitoy Count for	are. <u>21011410</u>				☐ Check if this is an amended filing
(if known)						·
Official Form						
Schedule C	: The Prope	rty You Cl	aim as Exem	pt		04/16
Using the property	you listed on <i>Sch</i> oill out and attach to	edule A/B: Prop o this page as m	erty (Official Form 10	6A/B)	as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amount ne amount of any enefits, and tax-ex % of fair market v	as exempt. Al applicable stat cempt retirementalue under a la	ternatively, you may utory limit. Some e nt fundsmay be un w that limits the exe	/ clair xemp limite empti	n the full fair market v tionssuch as those d in dollar amount. F	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	erty You Cla	im as Exempt			
1. Which set of	exemptions are y	ou claiming?	Check one only,	even	if your spouse is filing	with you.
لك ا	claiming state and claiming federal ex		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
2. For any prop	ertv vou list on S	chedule A/B th	at vou claim as exe	mpt. f	ill in the information	below.
Brief description				,		
Schedule A/B tha	t lists this proper		Current value of the portion you		ount of the mption you claim	Specific laws that allow exemption
Schedule A/B tha				exe	mption you claim	Specific laws that allow exemption
Brief description:	t lists this proper	ty	the portion you own Copy the value from	exe n Che eac	mption you claim	Specific laws that allow exemption Nev. Rev. Stat. § 21.090(1)(f), (p)
Brief description:	t lists this proper	ty	the portion you own Copy the value from Schedule A/B	exe	mption you claim eck only one box for h exemption \$10,500.00 100% of fair market	
	t lists this proper	ty	the portion you own Copy the value from Schedule A/B	exe Che eac	mption you claim eck only one box for h exemption \$10,500.00	
Brief description: 2004 FORD F-35 Line from Schedule Brief description:	t lists this proper 50 (approx. 2350 e <i>A/B</i> :3.1	000 miles)	the portion you own Copy the value from Schedule A/B	exe Che eac	sck only one box for h exemption \$10,500.00 100% of fair market value, up to any applicable statutory limit \$6,900.00	
Brief description: 2004 FORD F-35 Line from Schedul	t lists this proper 50 (approx. 2350 e <i>A/B:</i> 3.1	000 miles)	the portion you own Copy the value from Schedule A/B \$10,500.00	exe Che eac	sck only one box for the exemption \$10,500.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(f), (p)

Debtor 1 SCOTT LEHR Case number (if known) Middle Name First Name Last Name **Additional Page** Part 2: Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$3,000.00 \$3,000.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{V}}$ THE DEBTORS HAVE USED FURNITURE AND 100% of fair market **HOUSEHOLD GOODS.** value, up to any applicable statutory Line from Schedule A/B: 6 limit Brief description: \$150.00 \$150.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{Q}}$ THE DEBTORS HAVE A DELL LAPTOP 100% of fair market COMPUTER. IT IS 6 YRS OLD. value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$250.00 \$250.00 Nev. Rev. Stat. § 21.090(1)(i) $\overline{\mathbf{Q}}$ THE DEBTORS HAVE A MARLIN .270 RIFLE 100% of fair market П value, up to any Line from Schedule A/B: 10 applicable statutory limit Brief description: \$200.00 \$200.00 Nev. Rev. Stat. § 21.090(1)(i) \square THE DEBTORS HAVE A REMINGTON 12 100% of fair market **GAUGE SHOTGUN.** value, up to any applicable statutory Line from Schedule A/B: 10 limit Brief description: Nev. Rev. Stat. § 21.090(1)(z) \$150.00 \$150.00 $\overline{\mathbf{Q}}$ THE DEBTORS HAVE AN REMINGTON .870 100% of fair market 20 GAUGE SHOTGUN. value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$400.00 \$400.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{Q}}$ THE DEBTORS HAVE USED CLOTHING. 100% of fair market value, up to any Line from Schedule A/B: ___11 applicable statutory limit Brief description: \$4,000.00 \$4,000.00 Nev. Rev. Stat. § 21.090(1)(a) $\overline{\mathbf{Q}}$ THE DEBTORS HAVE JEWELRY. 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$100.00 \$100.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{A}}$ THE DEBTORS HAVE DOMESTIC PETS. 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$20.00 \$15.00 Nev. Rev. Stat. § 21.090(1)(g) \square THE DEBTORS HAVE SOME CASH ON 100% of fair market HAND. value, up to any (1st exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 16

LEHR Debtor 1 SCOTT Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$20.00 \$5.00 Nev. Rev. Stat. § 21.090(1)(z) \square THE DEBTORS HAVE SOME CASH ON 100% of fair market HAND. value, up to any applicable statutory (2nd exemption claimed for this asset) limit Line from Schedule A/B: 16 Brief description: \$500.00 \$375.00 Nev. Rev. Stat. § 21.090(1)(g) $\overline{\mathbf{A}}$ Checking account (GREATER NEVADA C.U.) 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.1 limit Brief description: \$500.00 \$125.00 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{Q}}$ Checking account (GREATER NEVADA C.U.) 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: \$25.00 \$18.75 Nev. Rev. Stat. § 21.090(1)(g) ablaSavings account (GNCU) 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.3 limit Brief description: \$25.00 Nev. Rev. Stat. § 21.090(1)(z) \$6.25 $\overline{\mathbf{Q}}$ Savings account (GNCU) 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.3 applicable statutory limit Brief description: \$0.02 \$0.00 Nev. Rev. Stat. § 21.090(1)(g) \square Checking account (WELLS FARGO) 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$0.02 \$0.02 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{Q}}$ Checking account (WELLS FARGO) 100% of fair market П (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$1,500.00 \$1,500.00 Nev. Rev. Stat. § 21.090(1)(r) \square 401(k) or similar plan-THE DEBTOR HAS A 100% of fair market 403(b) PLAN value, up to any applicable statutory Line from Schedule A/B: 21 limit Brief description: \$1,200.00 \$1,200.00 Nev. Rev. Stat. § 21.090(1)(n) $\overline{\mathbf{Q}}$ Security deposit on rental unit 100% of fair market value, up to any Line from Schedule A/B: 22 applicable statutory limit

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Fill in this i	nformation to i	dentify your case				
Debtor 1	SCOTT	J.	LEHR			
	First Name	Middle Name	Last Name			
Debtor 2	WHITNEY	R.	LEHR			
(Spouse, if filir	g) First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	the: DISTRICT OF	NEVADA			
Case number					_	
(if known)					Check if this is	
					amended filin	9
Official For	m 106D					
Schodula	D: Craditors	Who Have Cla	ime Secured I	hy Property		12/15
Scriedule	D. Creditors	vviio ilave Cia	iiiis Secureu i	by Property		12/13
correct informa	tion. If more space		Additional Page, fill	ogether, both are equal it out, number the entri own).	• •	
1. Do any cre	ditors have claims	secured by your pro	perty?			
121	heck this box and selfill in all of the inforr		ourt with your other so	chedules. You have noth	ning else to report on th	is form.
Part 1:	ist All Secured	Claims				
		reditor has more than o				
	•	y for each claim. If mo		Column A	Column B	Column C
	•	ist the other creditors i s in alphabetical order		Amount of claim	Value of collateral	Unsecured
creditor's n	·	3 III alphabelical oldel	according to the	Do not deduct the value of collateral	that supports this claim	portion If any
0.00.0000				value of collateral	Ciaiiii	папу

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Fill in this inf	ormation to ider				
Debtor 1	SCOTT	J.	LEHR		
	First Name	Middle Name	Last Name		
Debtor 2	WHITNEY	R.	LEHR		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the	e: District of Ne	VADA		
Case number (if known)					Check
(11 1410 1411)				I	amend

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.
- 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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Debtor 1	SCOTT	J.	LEHR	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2	List All of	Your NONPRIORI	TY Unsecured Clain	ns	
	•		d claims against you?	and the same of the same of the same	
	Yes	ning to report in this pa	rt. Submit this form to the	e court with your other schedules.	
If a c	creditor has more th of claim it is. Do no	an one nonpriority uns ot list claims already in	ecured claim, list the crec cluded in Part 1. If more	ler of the creditor who holds each claim. litor separately for each claim. For each claim listed, than one creditor holds a particular claim, list the other t the Continuation Page of Part 2.	•
					Total claim
4.1					\$2,800.00
	L ONE BANK Creditor's Name		Last 4 digits of acco	unt number	
P.O. BO			When was the debt i		
Number	Street		<u> </u>	le, the claim is: Check all that apply.	
SALTIA	AKE CITY	UT 84130	Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	rred the debt? (or 1 only	Check one.	Student loans		
_	or 2 only			g out of a separation agreement or divorce eport as priority claims	
<u> </u>	or 1 and Debtor 2 or			or profit-sharing plans, and other similar debts	
_	st one of the debto		Other. Specify		
	im subject to offse	or a community debt	Credit Card		
✓ No Yes	iiii subject to onse	et.			
4.2					\$3,200.00
CAPITA	L ONE BANK/KA	WASAKI	Last 4 digits of acco	unt number	
	Creditor's Name . RIVERWOODS	RLVD	When was the debt i	ncurred? 2011-16	
Number	Street	BLVD.	As of the date you fi	le, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
METTAV City		IL 60045 State ZIP Code			
•		Check one.	Type of NONPRIORI Student loans	TY unsecured claim:	
	or 1 only			g out of a separation agreement or divorce	
_	or 2 only or 1 and Debtor 2 or	nly	that you did not re	eport as priority claims	
	ast one of the debto		☐ Debts to pension Other. Specify	or profit-sharing plans, and other similar debts	
☑ Chec	k if this claim is fo	r a community debt	Credit Card		
	im subject to offse	et?			
✓ No ☐ Yes					

Debtor 1	SCOTT	J.	LEHR	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listing		n this page, number the	em sequentially from the	9	Total claim
4.3					\$50.00
	N TAHOE PHYS	CLINICS	Last 4 digits of acco	unt number	· · ·
P.O. BOX	Creditor's Name X 4540		When was the debt i	ncurred? 2016	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated Disputed		
CARSON City	I CITY	NV 89702 State ZIP Code	_ _ _		
	rred the debt?	Check one.		TY unsecured claim:	
	or 1 only		☐ Student loans ☐ Obligations arisin	g out of a separation agreement or divorce	
ш	or 2 only or 1 and Debtor 2	only	_	eport as priority claims	
	st one of the deb			or profit-sharing plans, and other similar debts	
–		for a community debt	Other. Specify Medical Bills		
	im subject to off	•	modical Billo		
☑ No	•				
☐ Yes					
4.4					\$1,100.00
CARSON	N TAHOE REGI	ONAL HEALTHCARE	Last 4 digits of acco	unt number	Ψ1,100.00
Nonpriority (Creditor's Name		When was the debt i		
Number	SS OFFICE Street		As of the date you fi	le, the claim is: Check all that apply.	
P.O. BO	X 1660		_ Contingent		
			Unliquidated Disputed		
GREELE	Υ	CO 80632			
City Who incu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	or 1 only	Official official	Student loans	a out of a congration agreement or diverse	
Debto	or 2 only			g out of a separation agreement or divorce eport as priority claims	
≌	or 1 and Debtor 2	-	-	or profit-sharing plans, and other similar debts	
_	st one of the deb	for a community debt			
		_	Medical Bills		
✓ No	im subject to off	561:			
Yes					
4.5					4700.00
ldot	IVALLEY MED	DICAL CENTER	Last 4 digits of acco	unt number	\$700.00
	Creditor's Name	JICAL CENTER	When was the debt i		
P.O. BOX				le, the claim is: Check all that apply.	
Number	Street		_	e, the claim is. Offect all that apply.	
			Unliquidated		
GARDNE	ERVILLE	NV 89410	Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	rred the debt? or 1 only	Check one.	Student loans		
	or 2 only		_	g out of a separation agreement or divorce	
Debto	or 1 and Debtor 2	-	•	eport as priority claims or profit-sharing plans, and other similar debts	
At lea	st one of the deb		Other. Specify	e. p. c channy plane, and other offinial dobte	
_		for a community debt	Medical Bills		
	im subject to off	set?			
✓ No ☐ Yes					

Debtor 1 SCOTT LEHR Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$3,600.00 CARSON VALLEY VET. HOSP Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 **1390 HIGHWAY 88** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **MINDEN** NV 89423 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? **☑** No Yes 4.7 \$1,900.00 **CBNA** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2005-16 P.O.BOX 6497 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed SIOUX FALLS SD 57117 City State **ZIP Code** Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? ✓ No ☐ Yes 48 \$200.00 FRONTIER COMMUNICATIONS Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2005 P.O. BOX 20550 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated \square Disputed ROCHESTER NY 14602 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Utility Bills** Is the claim subject to offset? **☑** No Yes

Debtor 1 SCOTT LEHR Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.9 \$600.00 HALL & WRYE PLASTIC SURGEONS Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 635 SIERRA ROSE DR. SUITE "A" Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **RENO** NV 89511 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? **☑** No Yes 4.10 \$4,500.00 HARDESTY'S GENERAL REPAIR Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 C/O GARY HARDESTY As of the date you file, the claim is: Check all that apply. Number Street **12 STATE ROUTE 208** Contingent Unliquidated Disputed **YERINGTON** NV 89447 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt $\overline{\mathbf{A}}$ FOR UNPAID SERVICES Is the claim subject to offset? ✓ No ☐ Yes 4 11 \$100,000.00 LARAN, LLC Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2012 **7061 15th STREET** As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **SARASOTA** FL 34243 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Unpaid Loan** Is the claim subject to offset? ✓ No Yes

Debtor 1 SCOTT LEHR Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.12 \$3,700.00 **MERRICK BANK** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1999-16 P.O. BOX 9201 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 11804 **OLD BETHPAGE** NY ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes 4.13 \$900.00 Last 4 digits of account number National Business Factors Nonpriority Creditor's Name When was the debt incurred? 2012-13 969 Mica Drive As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **Carson City** NV 89705 City State **ZIP Code** Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt $\overline{\mathbf{A}}$ **Collecting for - MEDICAL** Is the claim subject to offset? ✓ No ☐ Yes 4 14 \$100.00 **NORTHERN NEVADA ANESTHESIA** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. BOX 398289 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed SAN FRANCISCO CA 94139 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? ✓ No Yes

Debtor 1 SCOTT LEHR Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.15 \$2,000.00 **OPERATING ENGINEER'S F.C.U. #3** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2011-16 250 N. CANYONS PARKWAY Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **LIVERMORE** CA 94551 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes 4.16 \$800.00 **RENOWN HEALTH** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. BOX 30006 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **RENO** NV 89520 City State **ZIP Code** Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt $\overline{\mathbf{A}}$ **Medical Bills** Is the claim subject to offset? ✓ No ☐ Yes 4 17 \$550.00 SKIN CANCER & DERMATOLOGY INST. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2015-16 3950 G.S. RICHARDS BLVD As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **CARSON CITY** NV 89703 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? ✓ No Yes

Debtor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case number (if known)	
Part 2:	Your NON	IPRIORITY Unsacu	ıred Claims Contii	nuation Page	
			em sequentially from the		
previous	• •	i ilio pago, namboi ili	om coquomiumy mom uno		Total claim
4.18					\$500.00
	CAPITAL		Last 4 digits of accor	unt number	
	Creditor's Name ARKET STREET	#600	When was the debt in	ncurred? <u>2015</u>	
Number	Street		_	e, the claim is: Check all that apply.	
SAN ED	ANCISCO	CA 94103	Disputed		
City	41401300	State ZIP Code	Type of NONPRIORI	ΓY unsecured claim:	
	rred the debt?	Check one.	☐ Student loans		
	or 1 only or 2 only			g out of a separation agreement or divorce	
_	or 1 and Debtor 2 o	only	•	port as priority claims or profit-sharing plans, and other similar debts	
At lea	st one of the debt	ors and another	Other. Specify	or profit straining plants, and other striniar debte	
	k if this claim is f	or a community debt	Unpaid Loan		
	im subject to offs	set?			
✓ No ☐ Yes					
4.19					\$300.00
	FRACTURE & C	RTHO	Last 4 digits of accor	unt number	
	Creditor's Name A DR. #201		When was the debt in	ncurred? <u>2015-16</u>	
Number	Street		_	e, the claim is: Check all that apply.	
			Disputed		
CARSON	N CITY	NV 89705 State ZIP Code	Type of NONDRIORI	TV upagoured alaim:	
Who incu	rred the debt?	Check one.	Type of NONPRIORIT	i i unsecureu ciaim.	
=	or 1 only			g out of a separation agreement or divorce	
二	or 2 only or 1 and Debtor 2 o	nnly	-	port as priority claims	
سنا	st one of the debt	•	□ ~44	or profit-sharing plans, and other similar debts	
	k if this claim is f	or a community debt	Other. Specify Medical Bills		
	im subject to offs	_			
☑ No					
Yes					
4.20					\$6,600.00
WELLS I	FARGO BANK		Last 4 digits of accor	unt number	
Nonpriority (P.O. BO)	Creditor's Name		When was the debt in	ncurred? 2008-16	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			─		
DES MO	INES	IA 50306	— Disputed		
Who incu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORI	ΓY unsecured claim:	
	or 1 only		Student loans Obligations arising	n out of a senaration agreement or divorce	
– –	or 2 only			g out of a separation agreement or divorce port as priority claims	
<u> </u>	or 1 and Debtor 2 o	•	☐ Debts to pension	or profit-sharing plans, and other similar debts	
_	st one of the debt	ors and another or a community debt	Other. Specify		
_	im subject to offs		Credit Card		
✓ No	iiii subject to olis				
☐ Yes					

Debtor 1	SCOTT	J.	LEHR	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$134,100.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$134,100.00

Fill in this information to identify your case:								
Debtor 1	SCOTT First Name	J. Middle Name	LEHR Last Name					
Debtor 2	WHITNEY	R.	LEHR					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Ba	nkruptcy Court for the							
Case number (if known)					Check if this is an amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Debtor 1 SCOTT J. LEHR
First Name Middle Name Last Name Debtor 2 WHITNEY R. LEHR
Debtor 2 WHITNEY R. LEHR (Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: DISTRICT OF NEVADA
Case number
(if known)

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this

μας	ge. On the top of any Additional Fages, write your name a	nu case number (ii known). Answer every question.				
1.	Do you have any codebtors? (If you are filing a joint case ✓ No ✓ Yes	se, do not list either spouse as a codebtor.)				
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)					
3.	 No. Go to line 3. Yes. Did your spouse, former spouse, or legal equival No Yes In Column 1, list all of your codebtors. Do not include y 	ent live with you at the time? our spouse as a codebtor if your spouse is filing with you. List the				
	person shown in line 2 again as a codebtor only if that p	person is a guarantor or cosigner. Make sure you have listed the E/F (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use				
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the deb				
		Check all schedules that apply:				

Official Form 106H **Schedule H: Your Codebtors** page 1

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						_				
F	ill in this inform	ation to id	lentify your case:							
	Debtor 1	SCOTT	J.	LEHR						
		First Name	Middle Name	Last Name			_ Che	eck if this is:		
1	Debtor 2 (Spouse, if filing)	WHITNEY First Name	R. Middle Name	LEHR Last Name			$- \Box$	An amended filing		
	United States Bankru						_ 🗖	A supplement showing		
1	Case number (if known)				_			chapter 13 income as	or the ro	ollowing date:
	fficial Form 10							MM / DD / YYYY		
_	chedule I: You		ıe.							12/15
_								d Debtor 2), both are e		
inc abo you	lude information about your spouse. If ur name and case no	out your spo more space	ouse. If you are separ is needed, attach a se own). Answer every o	ated and your spo parate sheet to th	use i	s not fili	ng with y	spouse is living with you, do not include infication and additional pages,	ormatio	n
1.	Fill in your employ	yment								
	information.			Debtor 1				Debtor 2 or non-fili	ng spou	se
	If you have more the job, attach a separa with information ab	ate page	Employment status	☐ Employed✓ Not employed	ed			✓ Employed✓ Not employed		
	additional employe	rs.	Occupation	DISABLED				ADMIN ASSISTAL	NT	
	Include part-time, s or self-employed w		Employer's name					TOWN OF MINDE	N	
	Occupation may inc student or homema applies.		Employer's address	Number Street				1604 ESMERALD Number Street	A AVE.	
								MINDEN	NV	89423
				City		State Z	ip Code	City	State	Zip Code
			How long employed tl	nere?				<u>1 YR</u>		_
P	art 2: Give D	etails Abo	ut Monthly Incom	е						
	timate monthly inco			n. If you have noth	ing to	report fo	r any line	e, write \$0 in the space.	Include	your
If y	ou or your non-filing s	spouse have		er, combine the inf	ormati	on for all	employe	ers for that person on the	e lines b	elow. If
	·	·				For Deb	otor 1	For Debtor 2 or non-filing spouse	_	
2.			ary, and commissions monthly, calculate what		2.		\$0.00	\$1,138.21		
3.	Estimate and list i	monthly over	rtime pay.		3. +	·	\$0.00	\$0.00		
4.	Calculate gross in	icome. Add	line 2 + line 3.		4.		\$0.00	\$1,138.21		

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	SCOTT	J.	LEHR		Case n	umbe	er (if known)		
		First Name	Middle Name	Last Name		For Debtor 1		For Debtor 2 or non-filing spou		
	-	-		····· →	4.	\$0.00		\$1,138.21	_	
5.		all payroll ded						444		
			e, and Social Security dedu		5a.	\$0.00		\$16.51	_	
	5b.	Mandatory co	ontributions for retirement p	olans	5b.	\$0.00		\$0.00	_	
		-	ntributions for retirement pl		5c.	\$0.00		\$85.37	_	
	5d.	Required rep	ayments of retirement fund	loans	5d.	\$0.00		\$0.00	_	
	5e.	Insurance			5e.	\$0.00		\$0.00	_	
	5f.	Domestic sup	port obligations		5f.	\$0.00		\$0.00	_	
	5g.	Union dues			5g.	\$0.00		\$0.00	<u>-</u>	
	5h.	Other deduct Specify:	ions.		5h. +	\$0.00		\$0.00	<u>_</u>	
6.		I the payroll de - 5h.	eductions. Add lines 5a + 9	5b + 5c + 5d + 5e + 5f +	6.	\$0.00		\$101.88	<u>-</u>	
7. 8.			onthly take-home pay. Some regularly received:	ubtract line 6 from line 4.	7.	\$0.00		\$1,036.33	_	
٥.			om rental property and from	m onerating a	8a.	\$0.00		\$0.00	1	
	oa.	business, pro	ofession, or farm		oa.	φυ.υυ			_	
		gross receipts	ment for each property and b , ordinary and necessary bus hly net income.	•						
	8b.	Interest and o	dividends		8b.	\$0.00		\$0.00)	
	8c.		ort payments that you, a nor gularly receive	n-filing spouse, or a	8c.	\$0.00		\$0.00	_	
			ny, spousal support, child sup ment, and property settlemen	•						
	8d.	Unemployme	nt compensation		8d.	\$0.00		\$0.00)	
	8e.	Social Securi	ty		8e.	\$2,000.00		\$0.00	_	
	8f.	Include cash a	ment assistance that you re assistance and the value (if k ce that you receive, such as t er the Supplemental Nutrition osidies.	nown) or any non- food stamps					_	
		Specify:			8f.	\$0.00		\$0.00	_	
	8g.	Pension or re	etirement income		8g.	\$484.00		\$0.00	<u>) </u>	
	8h.	Other monthl	y income.						_	
		Specify:			8h.	- \$0.00		\$0.00	<u></u>	
9.	Add	l all other inco	me. Add lines 8a + 8b + 8c -	+ 8d + 8e + 8f + 8g + 8h.	9.	\$2,484.00] [\$0.00	<u> </u>	
10.			income. Add line 7 + line 9 ine 10 for Debtor 1 and Debtor		10.	\$2,484.00	+	\$1,036.33	<u> </u>	\$3,520.33
11.	 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 									
	ו סע	not include any	amounts already included in	ines 2-10 or amounts tha	ι are n	iot avaliable to pay	exp	erises listed in	ocne	Jule J.
	Spe	cify:						11	. +	\$0.00
12.	inco		n the last column of line 10 to amount on the Summary of `							\$3,520.33 Combined
13.	Do	you expect an	increase or decrease within	n the year after you file t	his fo	rm?				monthly income
		No.	None.							
		Yes. Explain:								

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Fill in this info	rmation to ide	entify you	ır case:			l			
Debtor 1	SCOTT	J.		LEHF	2	Ι .	k if this is: An amended f	ilina	
20001	First Name		ddle Name	Last Na			A supplement	•	ostpetition
Debtor 2 (Spouse, if filing)	WHITNEY First Name	R.	ddle Name	LEHF Last Na		chapter 13 expenses as of following date:			
United States Bar	nkruptcy Court for	the: DIS	TRICT OF N	EVADA			MM / DD / YY	/Y	_
Case number (if known)									
Official Form 1	106J								
Schedule J: \	our Expen	ses							12/1
correct information name and case num	If more space in the little in	s needed, a Answer ev	attach anothe		ling together, both ar this form. On the top				
Part 1: Desc	ribe Your Ho	usehold							
. Is this a joint ca	ase?								
_ 	Debtor 2 live in	-		2, Expense	s for Separate Housel	nold of E	Debtor 2.		
. Do you have de	ependents?	☐ No			Dependentie veleti	anahin 1	ta Damai	. d. m#la	Dage dependen
Do not list Debto Debtor 2.	or 1 and		Fill out this info ch dependent.				age	ndent's	Does dependent live with you? ☐ No
Do not state the	denendents'				SON		25		✓ Yes
names.	череписть				DAUGHTER		21		□ No ✓ Yes
									□ No
									Yes
									□ No □ Yes
									□ No
_									Yes
•	ses include cople other than our dependents?	, <u>d</u>	No Yes						
yoursell allu yo	our dependents:								
Part 2: Estir	nate Your On	going M	onthly Expe	enses					
stimate vour expe	as of a date after	r the bankr	-	-	are using this form as a supplemental Scheo			-	
o report expenses					. know the value of				
	aid for with non-						<u>You</u>	r expense	es
o report expenses the form and fill in the form and fill in the form and fill in the following the f	aid for with non-	it on Sched expenses f	dule I: Your In or your reside	come (Offi ence.			You 4.	r expense	\$1,200.00
o report expenses the form and fill in the form and fill in the form and fill in the following the f	aid for with non- d have included ome ownership o	it on Sched expenses f	dule I: Your In or your reside	come (Offi ence.				r expense	
o report expenses the form and fill in the normal section of the formal section of the first more of t	aid for with non- d have included one ownership of tgage payments a in line 4:	it on Sched expenses f	dule I: Your In or your reside	come (Offi ence.				r expense	
o report expenses the form and fill in the form and fill in the form and fill in the first assistance and the first more from the first more from the first assistance data. Real estate	aid for with non- d have included to ome ownership of tgage payments a in line 4:	it on Scheo expenses f and any ren	dule I: Your In	come (Offi ence.			4.		\$1,200.00
o report expenses the form and fill in the include expenses product assistance and include first more included. 4a. Real estate 4b. Property, here	aid for with non- d have included one ownership of tgage payments a in line 4:	it on Scheo expenses f and any ren	dule I: Your In for your reside at for the groun	come (Offi ence.			4. 4a.		

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Case number (if known)

Debtor 1 SCOTT J. LEHR

	First Name	Middle Name	Last Name		
				Your expense	es
5.	Additional mortgage payme	ents for your reside	nce, such as home equity loans	5	
6.	Utilities:				
	6a. Electricity, heat, natural	gas		6a	\$210.00
	6b. Water, sewer, garbage of	collection		6b	
	6c. Telephone, cell phone, I cable services	Internet, satellite, and	d	6c	\$465.00
	6d. Other. Specify:			6d.	
7.	Food and housekeeping su	pplies		7.	\$800.00
8.	Childcare and children's ed	lucation costs		8.	
9.	Clothing, laundry, and dry o	cleaning	(See continuation sheet(s) for details)	9.	\$165.00
10.	Personal care products and	d services		10.	\$70.00
11.	Medical and dental expense	es		11.	\$190.00
12.	Transportation. Include gas fare. Do not include car payr	12.	\$880.00		
13.	Entertainment, clubs, recremagazines, and books	13.	\$125.00		
14.	Charitable contributions an	ns	14.		
15.	Insurance.				
	Do not include insurance ded	ducted from your pay	or included in lines 4 or 20.		
	15a. Life insurance			15a	\$120.00
	15b. Health insurance			15b	
	15c. Vehicle insurance			15c	\$380.00
	15d. Other insurance. Spec			15d	
16.	0 ''	,	ur pay or included in lines 4 or 20.	16.	
17.	Installment or lease paymen	nts:			
	17a. Car payments for Vehi	icle 1		17a	
	17b. Car payments for Vehi	icle 2		17b	
	17c. Other. Specify:		<u> </u>	17c	
	17d. Other. Specify:			17d	
18.			support that you did not report as Your Income (Official Form 106I).	18.	
19.	Other payments you make to Specify:	to support others w	ho do not live with you.	19.	

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Deb	tor 1	SCOTT	J.	LEHR	Case number (if know	wn)
		First Name	Middle Name	Last Name		· -
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or	on	
	20a.	Mortgages on o	ther property		20a.	
	20b.	Real estate tax	es		20b.	
	20c.	Property, home	owner's, or renter's insura	ince	20c.	
	20d.	Maintenance, re	epair, and upkeep expens	es	20d.	
	20e.	Homeowner's a	ssociation or condominiu	m dues	20e.	
21.	Othe	er. Specify: PE	T CARE		21.	+\$80.00
22.	Calc	culate your mont	hly expenses.			
	22a.	Add lines 4 thro	ough 21.		22a.	\$4,685.00
	22b.	Copy line 22 (m	nonthly expenses for Deb	or 2), if any, from Official For	m 106J-2. 22b.	
	22c.	Add line 22a ar	nd 22b. The result is your	monthly expenses.	22c.	\$4,685.00
23.	Calc	culate your mont	hly net income.			
	23a.	Copy line 12 (y	our combined monthly inc	ome) from Schedule I.	23a.	\$3,520.33
	23b.	Copy your mon	thly expenses from line 2	2c above.	23b.	- \$4,685.00
	23c.		nonthly expenses from your monthly net income.	ur monthly income.	23c.	(\$1,164.67)
24.	Do y	ou expect an inc	crease or decrease in yo	ur expenses within the yea	r after you file this form?	
				your car loan within the year modification to the terms of y	or do you expect your mortgage our mortgage?	
		No				
		Yes. Explain her		DIET DUE TO HEALTH O	CONDITIONS.	

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Debtor 1	SCOTT	J.	LEHR	Case number (if know	n)
	First Name	Middle Name	Last Name		
CLOT	thing, laundry, a	nd dry cleaning (details):			
	OTHING				\$150.00
	UNDRY				\$15.00
				Total:	\$165.00

F	ill in this inf	ormation to i	dentify your case:	:		
D	ebtor 1	SCOTT	J.	LEHR		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	WHITNEY First Name	R. Middle Name	LEHR Last Name	_	
U	nited States Ba	nkruptcy Court fo	the: DISTRICT OF I	NEVADA		
	ase number f known)				☐ Check i	f this is an
	- Kilowiij				amende	ed filing
	fficial Form					
Sı	ummary of	f Your Asse	ts and Liabilit	ies and Certain S	tatistical Information	12/15
cor sch	rect information	on. Fill out all of ou file your origi	your schedules first; nal forms, you must f	then complete the information	er, both are equally responsible for ation on this form. If you are filing d check the box at the top of this	g amended
P	art 1: Su	mmarize You	Assets			
						Your assets Value of what you own
1.		: Property (Officia	•	_		\$0.00
	1a. Copy line	e 55, Total real es	tate, from Schedule A/	В		
	1b. Copy line	e 62, Total person	al property, from Sche	dule A/B		\$28,895.02
	1c. Copy line	e 63, Total of all p	roperty on Schedule A	/B		\$28,895.02
Р	art 2: Su	mmarize You	Liabilities			
						Your liabilities Amount you owe
2.				Property (Official Form 106 claim, at the bottom of the	SD) last page of Part 1 of Schedule D	\$0.00
3.				s (Official Form 106E/F) red claims) from line 6e of	Schedule E/F	\$0.00
	3b. Copy the	total claims from	Part 2 (nonpriority uns	secured claims) from line 6j	of Schedule E/F	+ \$134,100.00
					Your total liabilities	\$134,100.00
P	Part 3: Su	mmarize You	· Income and Exp	enses		
	34					
4.		our Income (Offic mbined monthly in		Schedule I		\$3,520.33
5.			fficial Form 106J) om line 22c of Schedu	le J		\$4,685.00

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Deb	otor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case numbe	r (if known)			
P	art 4:	Answer Th	ese Questions fo	or Administrative and	d Statistical Record	ls			
6.	Are yo	ou filing for bank	ruptcy under Chapte	rs 7, 11, or 13?					
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes								
7.	What I	kind of debt do y	ou have?						
		•	•	ots. Consumer debts are . § 101(8). Fill out lines 8-			a personal,		
Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
8.	S. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$1,518.7						\$1,518.73		
9.	Copy t	the following spe	ecial categories of cla	aims from Part 4, line 6 o	f Schedule E/F:				
						Total claim			
	From I	Part 4 on Sched	ule E/F, copy the follo	owing:					
	9a. D	omestic support	obligations. (Copy line	e 6a.)		\$0.0	<u>0</u>		
	9b. Ta	axes and certain	other debts you owe th	ne government. (Copy line	6b.)	\$0.0	<u>0</u>		
	9c. C	laims for death or	r personal injury while	you were intoxicated. (Cop	by line 6c.)	\$0.0	<u>0</u>		
	9d. S	tudent loans. (Co	opy line 6f.)			\$0.0	<u>0</u>		
	9e. O	bligations arising	out of a separation ag	reement or divorce that yo	ou did not report as	\$0.0	0		

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

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Fill in this in	formation to id	dentify your case	:	
Debtor 1	SCOTT	J.	LEHR	
	First Name	Middle Name	Last Name	
Debtor 2	WHITNEY	R.	LEHR	
(Spouse, if filing) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for	r the: DISTRICT OF	NEVADA	
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who	is NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I hat true and correct.	ave read the summary and schedules filed with this declaration and that they are
true and correct.	
X /s/ SCOTT J. LEHR	X /s/ WHITNEY R. LEHR
SCOTT J. LEHR, Debtor 1	WHITNEY R. LEHR, Debtor 2
Date 09/21/2016 MM / DD / YYYY	Date <u>09/21/2016</u> MM / DD / YYYY

Fill in this inf	formation to ide	entify your cas	se:				
Debtor 1	SCOTT	J.		LEHR			
	First Name	Middle Name		Last Name			
Debtor 2 (Spouse, if filing)	WHITNEY First Name	R. Middle Name		LEHR Last Name			
			= \!=\ <i>!</i>				
United States Ba	inkruptcy Court for t	he: DISTRICTO	FNEV	ADA			
Case number (if known)							k if this is an
,						amer	nded filing
Official Form	<u> 107</u>						
Statement of	of Financial A	Affairs for In	divid	duals Fi	ling for Bankr	uptcy	04/16
Part 1: Given	ve Details Abοι	ıt Your Marital	Statu	ıs and W	here You Lived B	efore	
 What is your Married Not marri 	current marital sta	atus?					
	ıst 3 years, have yo	ou lived anywhere	e other	than where	e vou live now?		
□ No		_			lude where you live no	w.	
Debtor 1:			Dates D	ebtor 1 ere	Debtor 2:		Dates Debtor 2 lived there
					✓ Same as Debte	or 1	Same as Debtor
1600 CH	IQUITA CIRCLE	F	rom	4-05			From
	Street				Number Street		To
			Го —	8-14			
MINDEN	NV	89423					
City		ZIP Code			City	State ZIP Code	
Debtor 1:			Dates D	ebtor 1	Debtor 2:		Dates Debtor 2 lived there
					Same as Debt	or 1	Same as Debtor
4070 07		-	-no no	0.44	_		
-	ODIECK PKWY Street		rom	8-14	Number Street		From
			Го	10-14	-		To

GARDNERVILLE

NV 89410

State ZIP Code

City

State ZIP Code

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Debtor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case nu	mber (if known)		
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there	
				✓ Same as Debt	or 1	Same as Debtor 1	
_	1368 GRANBOROUGH DRIVE Number Street		From 10-14			From	
N			To PRESENT	Number Street		То	
_	SARDNERVILLE	NV 89410	_		21.1. 710.0.1		
C	City	State ZIP Code		City	State ZIP Code		
☑ ☐ Part 2	Explain the \$	Il out Schedule H: Yo		· 			
Fill ii	n the total amount of in	ncome you received for	rom all jobs and all bus te that you receive toge	inesses, including par		endar years?	
	No Yes. Fill in the details						
		De	ebtor 1		Debtor 2		
			rces of income ck all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
	nuary 1 of the current you filed for bankrup	· —	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	\$9,300.00	
		-	Operating a business		Operating a business		
For the la	ast calendar year:		Wages, commissions,	-	Wages, commissions,	\$31,600.00	
(January	1 to December 31, <u>2</u>	015)	bonuses, tips Operating a business		bonuses, tips Operating a business		
For the c	alendar year before t	hat:	Wages, commissions,		☐ Wages, commissions,	\$92,800.00	
(January	1 to December 31, 2	014)	bonuses, tips Operating a business		bonuses, tips Operating a business		
	Y	YYY L	. 5		F		

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Deb	otor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	Case nu	mber (if known)	
5.	Include unemp and ga Debtor	e income regardless bloyment; and other p ambling and lottery w r 1.	of whether that public benefit pa innings. If you	ing this year or the two pre- tincome is taxable. Examp ayments; pensions; rental in are in a joint case and you	les of other income are ncome; interest; dividen have income that you r	alimony; child support; So ds; money collected from eceived together, list it on	lawsuits; royalties;
	□ No	· ·	oss meome ne	mi cacii source separatery.	Do not monate moonie	that you listed in line 4.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
		ary 1 of the current ou filed for bankrupt	•	SOCIAL SECURITY PENSION INCOME	\$19,200.00 \$4,400.00		
		t calendar year: to December 31, 20		SOCIAL SECURITY PENSION INCOME	\$25,600.00 \$5,800.00		
		endar year before the to December 31, 20	nat: 014)	SOCIAL SECURITY PENSION INCOME	\$25,100.00 \$5,800.00	UNEMPLOYMENT	\$400.00
		YYY	Ť			<u></u>	

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		SCOTT	J.	LEHR	Case number (if known)				
		First Name	Middle Name	Last Name					
P	art 3:	List Certa	ain Payments You	Made Before You	Filed for Bankruptcy				
6.	Are eith	er Debtor 1's	or Debtor 2's debts pr	imarily consumer debt	ts?				
	□ No.		ebtor 1 nor Debtor 2 has y an individual primarily	•	debts. Consumer debts are defined in 11 U.S.C. § 101(8) as r household purpose."				
		During the	90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$6,425* or more?				
No. Go to line 7.									
		to	tal amount you paid that	creditor. Do not includ	of \$6,425* or more in one or more payments and the e payments for domestic support obligations, such as ayments to an attorney for this bankruptcy case.				
		* Subject to	o adjustment on 4/01/19	and every 3 years after	that for cases filed on or after the date of adjustment.				
	✓ Yes.	Debtor 1 o	r Debtor 2 or both have	primarily consumer o	lebts.				
		During the	90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$600 or more?				
		▼ No. Go	to line 7.						
		cr		ayments for domestic s	of \$600 or more and the total amount you paid that upport obligations, such as child support and alimony. his bankruptcy case.				
7.	Insiders corporat agent, in	include your ions of which	relatives; any general pa you are an officer, direct or a business you operat	ortners; relatives of any ofter, person in control, or	ment on a debt you owed anyone who was an insider? general partners; partnerships of which you are a general partner; owner of 20% or more of their voting securities; and any managing 11 U.S.C. § 101. Include payments for domestic support obligations				
	✓ No ☐ Yes.	List all payn	nents to an insider.						
8.		year before d an insider	•	y, did you make any p	ayments or transfer any property on account of a debt that				
	Include	payments on	debts guaranteed or cos	igned by an insider.					
	✓ No ☐ Yes.	List all payn	nents that benefited an ir	nsider.					
_	out 4.	lalamtifi. I	and Actions Dani						
	art 4:		egal Actions, Repo						
9.	List all s	uch matters, i			any lawsuit, court action, or administrative proceeding? ions, divorces, collection suits, paternity actions, support or custody				
	✓ No ☐ Yes.	. Fill in the de	etails.						

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Deb	tor 1	SCOTT	J.	LEHR	Case number (if known)					
10.	seized, Check a	or levied? all that apply and	Middle Name ou filed for bankrupt I fill in the details belo		perty repossessed, foreclosed, garnished, attached,					
		Go to line 11. S. Fill in the info	rmation below.							
11.	. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?									
	✓ No ☐ Yes	s. Fill in the deta	iils.							
12.				cy, was any of your pro stodian, or another offic	perty in the possession of an assignee for the benefit of cial?					
	✓ No	3								
Pa	art 5:	List Certai	n Gifts and Cont	ributions						
13.	Within	2 years before	you filed for bankrup	tcy, did you give any g	ifts with a total value of more than \$600 per person?					
	✓ No ☐ Yes	s. Fill in the deta	ils for each gift.							
14.		2 years before y charity?	you filed for bankrup	tcy, did you give any g	ifts or contributions with a total value of more than \$600					
	✓ No ☐ Yes	s. Fill in the deta	ills for each gift or cor	itribution.						
Pa	art 6:	List Certai	n Losses							
15.		1 year before ye isaster, or gam	•	cy or since you filed fo	r bankruptcy, did you lose anything because of theft, fire,					
	✓ No	s. Fill in the deta	iils.							
Pá	art 7:	List Certai	n Payments or T	ransfers						
16.		-	•	cy, did you or anyone e ruptcy or preparing a b	lse acting on your behalf pay or transfer any property to ankruptcy petition?					
	Include	any attorneys, b	ankruptcy petition pre	parers, or credit counse	ing agencies for services required for your bankruptcy.					
	✓ No ☐ Yes	s. Fill in the deta	iils.							

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Deb	tor 1	SCOTT	J.	LEHR	Case number (if known)					
17.			•	•	else acting on your behalf pay or transfer any property to					
	-			th your creditors or to ou listed on line 16.	make payments to your creditors?					
		noidue any payme	ant of transfer that y	you listed on line 10.						
	✓ No ☐ Yes	. Fill in the details	S.							
18.		-		ptcy, did you sell, trade e of your business or	e, or otherwise transfer any property to anyone, other than financial affairs?					
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	✓ No ☐ Yes	. Fill in the details	S.							
19.		-		uptcy, did you transfer called asset-protection o	any property to a self-settled trust or similar device of which levices.)					
	✓ No ☐ Yes	. Fill in the details	s.							
Pa	Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units									
20.			i filed for bankrupt oved, or transferre		accounts or instruments held in your name, or for your					
			•	other financial account ations, and other financ	s; certificates of deposit; shares in banks, credit unions, brokerage ial institutions.					
	☑ No ☐ Yes	. Fill in the details	S.							
21.	-	now have, or did urities, cash, or d	-	1 year before you filed	for bankruptcy, any safe deposit box or other depository					
	✓ No ☐ Yes	. Fill in the details	S.							
22.	•	ou stored propert	ty in a storage unit	t or place other than ye	our home within 1 year before you filed for bankruptcy?					
	✓ No ☐ Yes	. Fill in the details	S .							
Pa	art 9:	Identify Pro	perty You Hold	or Control for So	meone Else					
23.	-	hold or control a		comeone else owns? I	nclude any property you borrowed from, are storing for,					
	✓ No ☐ Yes	. Fill in the details	S.							

Debtor 1	SCOTT First Name	J. Middle Nam	LEHR e Last Name	Case	e number	(if known) _			
Part 10			ironmental Information						
	urpose of Part 10								
■ Enviro	onmental law mea dous or toxic sub	ans any federal, stance, wastes,	state, or local statute or regul or material into the air, land, s Illing the cleanup of these suk	soil, surface wat	ter, groui	ndwater, or			
	-		perty as defined under any er ize it, including disposal sites		v, whethe	er you now	own, ope	rate, or	
			environmental law defines as nt, contaminant, or similar iter		aste, haz	zardous sub	stance, t	oxic	
Report al	l notices, release	s, and proceedin	igs that you know about, rega	rdless of when	they occ	urred.			
24. Has law?		I unit notified yo	u that you may be liable or po	otentially liable (under or	in violation	of an env	rironmental	
ين -	No ⁄es. Fill in the deta	ails.							
		governmental u	nit of any release of hazardou	ıs material?					
口 / 回 /	งo ⁄es. Fill in the deta	ails.							
	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	No /es. Fill in the deta	ails.							
Part 1	Give Deta	ils About You	r Business or Connection	ons to Any Bu	usiness	;			
	in 4 years before ness?	you filed for bar	ıkruptcy, did you own a busin	ess or have any	of the fo	ollowing cor	nections	to any	
	A member of a A partner in a An officer, dire	a limited liability o partnership ector, or managin	red in a trade, profession, or other company (LLC) or limited liability g executive of a corporation voting or equity securities of a corporation	/ partnership (LLI		or part-time			
	No. None of the al		to Part 12. d fill in the details below for eacl	h business.					
			Describe the nature of the bus	siness		er Identifica nclude Soci		ber ty number o	r ITIN.
Business Na 5 HWY 0	ame 5A NORTH				EIN:				
	Street		Name of accountant or bookk	eeper	Dates bu	usiness exis	sted		
					From	7-10	То	9-15	
YERING	TON NV	89447				<u></u>		-	-

State ZIP Code

City

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Debtor	1 \$	SCOTT	J. LE	EHR	Case	number (if known)
	Ē	First Name	Middle Name Las	st Name		· · · · · · · · · · · · · · · · · · ·
		•	led for bankruptcy, did yeditors, or other parties.		e a financial statement to	anyone about your business? Include
	•	Fill in the details be	low.			
Part	12:	Sign Below				
that an proper or both	swers ty by f n. 18 U	are true and correction J.S.C. §§ 152, 1341,	ct. I understand that ma with a bankruptcy case 1519, and 3571.	king a f can res	false statement, concealin sult in fines up to \$250,000	I declare under penalty of perjury ng property, or obtaining money or n, or imprisonment for up to 20 years,
		T J. LEHR	X		HITNEY R. LEHR	
300	JII J.	LEHR, Debtor 1		WHIIN	NEY R. LEHR, Debtor 2	
Date	e <u> </u>	9/21/2016		Date _	09/21/2016	
Did yo	u attac	h additional pages	to Your Statement of Fir	nancial .	Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
☑ No □ Yes						
Did you	u pay o	or agree to pay som	neone who is not an atto	rney to	help you fill out bankrupt	tcy forms?
☑ No						
		ne of person				Attach the Bankruptcy Petition Preparer's Notice,
						Declaration, and Signature (Official Form 119).

Fill in this inf	ormation to id	entify your case	:	
Debtor 1	SCOTT First Name	J. Middle Name	LEHR Last Name	
Debtor 2	WHITNEY	R.	LEHR	
(Spouse, if filing)		Middle Name	Last Name	
United States Bar	nkruptcy Court for	the: DISTRICT OF	NEVADA	
Case number				
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ SCOTT J. LEHR

SCOTT J. LEHR, Debtor 1

Date <u>09/21/2016</u> MM / DD / YYYY X /s/ WHITNEY R. LEHR

WHITNEY R. LEHR, Debtor 2

Date 09/21/2016 MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filling a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In re SCOTT J. LEHR
WHITNEY R. LEHR

Case No.			
Chapter	7		

		· — —
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition in services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows:	bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$900.00
	Prior to the filing of this statement I have received	\$500.00
	Balance Due	\$400.00
2.	. The source of the compensation paid to me was:	
	☑ Debtor ☐ Other (specify)	
3.	. The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	I have not agreed to share the above-disclosed compensation with any otl associates of my law firm.	ner person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with another perassociates of my law firm. A copy of the agreement, together with a list of compensation, is attached.	•
5.	. In return for the above-disclosed fee, I have agreed to render legal service for	all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy;	or in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and p	lan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030	(Form	2030)	(12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/21/2016 /s/ Sean P. Patterson, Esq.

Date Sean P. Patterson, Esq.
Sean Patterson., Esq.
232 Court Street

Reno, Nv. 89501 Phone: (775) 786-1615 / Fax: (775) 322-7288

Bar No. 5736

/s/ SCOTT J. LEHR /s/ WHITNEY R. LEHR

SCOTT J. LEHR WHITNEY R. LEHR

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: SCOTT J. LEHR
WHITNEY R. LEHR

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

1	•	e attached l	ist of creditors is true and correct to the best of his/her
KNOW	rledge.		
	0/04/0040		
Date	9/21/2016		/s/ SCOTT J. LEHR
			SCOTT J. LEHR
Date	9/21/2016	Signature	/s/ WHITNEY R. LEHR

WHITNEY R. LEHR

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CAPITAL ONE BANK P.O. BOX 30281 SALT LAKE CITY, UT. 84130

LARAN, LLC 7061 15th STREET SARASOTA, FL 34243

Chapter: 7

CAPITAL ONE BANK/KAWASAKI MERRICK BANK 26525 N. RIVERWOODS BLVD. P.O. BOX 9201 METTAWA, IL 60045

OLD BETHPAGE, N.Y. 11804

CARSON TAHOE PHYS CLINICS P.O. BOX 4540

National Business Factors 969 Mica Drive CARSON CITY, NV 89702 Carson City, Nv. 89705

CARSON TAHOE REGIONAL HEALTHCAR NORTHERN NEVADA ANESTHESIA BUSINESS OFFICE P.O. BOX 398289 P.O. BOX 1660 GREELEY, CO 80632

SAN FRANCISCO, CA 94139

P.O. BOX 790 GARDNERVILLE, NV 89410 LIVERMORE, CA 94551

CARSON VALLEY MEDICAL CENTER OPERATING ENGINEER'S F.C.U. #3 250 N. CANYONS PARKWAY

CARSON VALLEY VET. HOSP 1390 HIGHWAY 88 MINDEN, NV 89423

RENOWN HEALTH P.O. BOX 30006 RENO, NV. 89520

P.O.BOX 6497 SIOUX FALLS, SD. 57117 SKIN CANCER & DERMATOLOGY INST. 3950 G.S. RICHARDS BLVD. CARSON CITY, NV 89703

FRONTIER COMMUNICATIONS SQUARE CAPITAL P.O. BOX 20550 ROCHESTER, NY 14602

1455 MARKET STREET #600 SAN FRANCISCO, CA 94103

HALL & WRYE PLASTIC SURGEONS TAHOE FRACTURE & ORTHO 635 SIERRA ROSE DR. SUITE "A" 973 MICA DR. #201 RENO, NV 89511

CARSON CITY, NV 89705

HARDESTY'S GENERAL REPAIR C/O GARY HARDESTY 12 STATE ROUTE 208 YERINGTON, NV 89447

WELLS FARGO BANK P.O. BOX 14517 DES MOINES, IA 50306

Fill in this	information to i	dentify your cas	e:		e box only as dired in Form 122A-1Su	
Debtor 1	SCOTT	J.	LEHR			
	First Name	Middle Name	Last Name	1.There is	no presumption of abus	e.
Debtor 2 (Spouse, if fili	WHITNEY	R. Middle Name	LEHR Last Name		ulation to determine if a	
					applies will be made ur est Calculation (Official	•
United States	Bankruptcy Court fo	r the: DISTRICT OF	NEVADA		ins Test does not apply	
Case number (if known)					ed military service but it	
				☐ Check if t	his is an amended filing	
Official Fo	rm 122A-1					
Chapter 7	Statement of	f Your Curren	t Monthly Income			12/1
are exempted f military service I22A-1Supp) w	rom a presumption e, complete and file vith this form.	of abuse because y Statement of Exem	es, write your name and case you do not have primarily cons ption from Presumption of Ab	sumer debts or b	ecause of qualifying	
Part 1:	Calculate Your (Current Monthly	Income			
. What is yo	our marital and filing	g status? Check one	e only.			
☐ Not n	narried. Fill out Colu	mn A, lines 2-11.				
 Marri	ed and your spouse	e is filing with you.	Fill out both Columns A and B, I	ines 2-11.		
☐ Marri	ed and your spous	e is NOT filing with y	you. You and your spouse are):		
י ם	iving in the same h	ousehold and are n	ot legally separated. Fill out bo	oth Columns A and	d B, lines 2-11.	
	declare under penalt	y of perjury that you a	ed. Fill out Column A, lines 2-11 and your spouse are legally sepa ns that do not include evading th	rated under nonb	ankruptcy law that appli	es or that you
bankrupto August 31. in the resu	y case. 11 U.S.C. { If the amount of yo lt. Do not include an	§ 101(10A). For exar ur monthly income va y income amount mo	rived from all sources, derived imple, if you are filing on Septem aried during the 6 months, add thore than once. For example, if but have nothing to report for any limited that the second s	ber 15, the 6-mon ne income for all 6 oth spouses own t	th period would be Marc months and divide the the same rental property	h 1 through total by 6. Fill
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
•	s wages, salary, tip	s, bonuses, overtim	ne, and commissions	\$0.00	\$1,034.73	
3. Alimony a		yments. Do not incl	ude payments from a spouse	\$0.00	\$0.00	
expenses regular cor	of you or your depontributions from an un	endents, including on nmarried partner, me	paid for household child support. Include mbers of your household, regular contributions from	\$0.00	\$0.00	

on line 3.

a spouse only if Column B is not filled in. Do not include payments you listed

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Deb	tor 1	SCOTT	J.	LEH			ase number (if k	nown)	
		First Name	Middle N	lame Last f	Name		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net in	come from operatir	ng a busin	ess, profession, o	r farm				
				Debtor 1	Debtor 2				
		receipts (before all ctions)		\$0.00	\$0.00				
	Ordina	ary and necessary op nses	perating -	\$0.00	\$0.00				
		onthly income from a	a business,	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
6.	Net in	ncome from rental a	nd other re	eal property					
				Debtor 1	Debtor 2				
		receipts (before all ctions)		\$0.00	\$0.00				
	Ordina exper	ary and necessary op nses	erating -	\$0.00	\$0.00	Сору			
		onthly income from real property	ental or	\$0.00	\$0.00		\$0.00	\$0.00	
7.	Intere	est, dividends, and r	oyalties				\$0.00	\$0.00	
8.	Unem	ployment compens	ation				\$0.00	\$0.00	
		t enter the amount if it under the Social Se							
	Fo	r you			50.0	00			
	Fo	r your spouse			50.0	00			
9.		ion or retirement inc benefit under the So		,	ount received that		\$484.00	\$0.00	
10.	amou or pay or inte	ne from all other sount. Do not include an ments received as a grnational or domestic ate page and put the	ny benefits victim of a c terrorism.	received under the war crime, a crime If necessary, list o	Social Security A against humanity	ct ,			
	Total	amounts from separa	ate pages, i	if any.		 +		+	
11.	Add li	llate your total curre nes 2 through 10 for add the total for Colu	each colun	nn.	3.		\$484.00		\$1,518.73 Total current

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Deb	otor 1	_	COTT rst Name	J. Middle Name	LEHR Last Name		Case number (if known)
P	art 2	:	Determine	Whether the Me	ans Test Applies	to You	
12.	Calc	culate	your curren	t monthly income for	the year. Follow the	se steps:	
	12a.	Сор	y your total	current monthly income	e from line 11		Copy line 11 here 😝 12a. \$1,518.73
		Mul	tiply by 12 (tl	he number of months i	n a year).		X 12
	12b.	The	result is you	ır annual income for th	is part of the form.		12b. \$18,224.76
13.	Cald	culate	the median	family income that a	pplies to you. Follow	these steps:	
	Fill i	n the s	state in which	n you live.	Nev	/ada	
	Fill i	n the r	number of pe	ople in your household	d.	4	
	Fill i	n the r	median famil	y income for your state	e and size of househo	ld	13. \$67,887.00
				ble median income am m. This list may also b			
14.	How	do th	ne lines com	pare?			
	14a.	V	Line 12b is Go to Part		ine 13. On the top of	page 1, check	box 1, There is no presumption of abuse.
	14b.			more than line 13. Or 3 and fill out Form 122		neck box 2, Th	e presumption of abuse is determined by Form 122A-2.
P	art 3	:	Sign Belo	w			
	By	cianir	na horo I do	clare under penalty of	parium, that the inform	action on this s	tatement and in any attachments is true and correct.
	Бу	Sigilii	ig riere, i dec	state under penalty of p	perjury that the inform	auon on uns s	tatement and in any attachments is true and correct.
	X		COTT J. LE				WHITNEY R. LEHR
		SCO	TT J. LEHR,	Debtor 1		WF	ITNEY R. LEHR, Debtor 2
		Date	9/21/2016	<u> </u>		Dat	e <u>9/21/2016</u>
			MM / DD / `	YYYY			MM / DD / YYYY
	If v	ou ch	ecked line 1	4a do NOT fill out or fi	le Form 122Δ-2		

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Calculation Details

In re: SCOTT J. LEHR Case Number: WHITNEY R. LEHR Chapter: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month

Spouse GROSS INCOME FROM EMPLOYMENT

\$1,010.43 \$1,461.68 \$1,006.87 \$616.24 \$936.16 \$1,177.01 **\$1,034.73**

9. Pension and retirement income.

Debtor or Spouse's Income	Description (if available)						
	6	5	4	3	2	Last	Avg.
	Months	Months	Months	Months	Months	Month	Per
	Ago	Ago	Ago	Ago	Ago		Month

<u>PENSION INCOME</u> \$484.00 \$484.00 \$484.00 \$484.00 \$484.00 \$484.00 \$484.00